Location of Construction: Owner:			Phone:		Permit No:
371 Forest Ave. 04103	Michael Kaplan		774–9472		
Owner Address:	Lessee/Buyer's Name:	Phone:	Busines	sName:	
Ocean Ave. 04102 Forest Gardens					
Contractor Name:	Address:		hone:		Permit Issued:
* <u>Bailey Sign Co. Inc.</u>	* 9 Thomas Dr. Westh	prook 04092			- NOV - 1 19 99
Past Use:	Proposed Use:		COST OF WORK: PERMIT FEE: \$ 34.00		
Tavern	Same	\$			
		FIRE DEPT.	□ Approved	INSPECTION: 51944	
			Denied	Use Group: Type:	·
				BOCA96 111	Zone: CBL: 112-B-017
		Signature:		Signature: Haffson -	
Proposed Project Description:		PEDESTRIA	N ACTIVITIE	ES DISTRICT (P.A.D.)	
Remove exist	Action:	Approved	Veplac Stisty		
Replace w/ Ne		Approved v	Shoreland NOENLA-10		
			Denied		
		Signature:		Date:	\Box Subdivision $1 $
Permit Taken By: gd	Date Applied For: gd	October	26,1999		☐ Diste Plan maj ⊡minor ⊡mm ⁱ ⊡/
					Zoning Appeal
1. This permit application does not preclude the	Applicant(s) from meeting applicab	le State and Federal ru	les.		
					☐ Miscellaneous
2. Building permits do not include plumbing, septic or electrical work.					Conditional Use
3. Building permits are void if work is not started within six (6) months of the date of issuance. False informa- tion may invalidate a building permit and stop all work					□ Interpretation
					Denied
			PE WITH	RMIT ISSUED REQUIREMENTS	Historic Preservation Not in District or Landmark Does Not Require Review Requires Review Action:
	CERTIFICATION				
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all					□ Appoved □ Approved with Conditions
areas covered by such permit at any reasonable h				- the additional to enter an	Date:
	F or are	- (-) - FF	r r		
		a . 1	06 1000		
		October	20,1999	DUONE	
SIGNATURE OF APPLICANT	ADDRESS:	DATE:		PHONE:	PERMIT ISSUED
					WITH REQUIREMENTS
RESPONSIBLE PERSON IN CHARGE OF WOR	K TITLE			PHONE:	-1 1 1
REDI ONDIDELI EROON IN CHARGE OF WOR					CEO DISTRICT 2
White-Pe	ermit Desk Green–Assessor's	Canary–D.P.W. Pink	-Public File	lvory Card-Inspector	

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716